

## Frequently Asked Questions For CCC Plus Members

| Question  | Answer   |
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| What is CCC Plus?   | CCC Plus is a new Medicaid program that provides medical, behavioral, substance use disorder, and long term services and supports all under one program. CCC Plus is a statewide program that is being phased in by region. It began in the Tidewater region on August 1, 2017 and will operate statewide by January 1, 2018.  |
| When I enroll in CCC Plus, will I lose benefits that I am currently receiving under Medicaid? Will I receive any new benefits under CCC Plus? | Under your CCC Plus health plan, you will continue to receive all of the benefits you currently receive under Medicaid. Depending on the health plan you choose, you may receive additional benefits, such as dental, vision, hearing or membership to a wellness center. Carefully review the health plan comparison chart you receive in the mail with your letter. Or, you can go to <a href="http://www.cccplusva.com">www.cccplusva.com</a> for more information. |
| How do I know if I am being enrolled into CCC Plus? Will I receive a letter in the mail?  | A letter will be sent to you prior to your enrollment date, and will include an easy-to-read brochure and health plan comparison chart so you can view the different health plans available to you. This letter will also explain the process if you want to change health plans. If you don't receive a letter, you can call the CCC Plus Helpline at 1-844-374-9159 to inquire further.  |
| If I have questions about CCC Plus, where do I go for more information?   | For questions about CCC Plus, call the CCC Plus Helpline at 1-844-374-9159. You can also go to <a href="http://www.cccplusva.com">www.cccplusva.com</a> for more information.  |
| I opted out of the CCC demonstration. Is it true that the CCC Plus Program is mandatory and I can't opt out?                                  | Yes, CCC Plus is required for all eligible individuals, who include Medicaid members who are either 65 and older, children and adults with disabilities, nursing facility residents, or someone receiving services through a home and community based waiver.  |
| After I am enrolled into a CCC Plus health plan, if I find the plan is not appropriate, can I change to a different health plan?              | Yes, you have 90 days from the effective date of your enrollment to change to another health plan. To change health plans within those 90 days, call the CCC Plus Helpline at 1-844-374-9159. For those members in the Tidewater or Central Virginia region, you have until December 18, 2017 to change plans.   |
| What insurance cards do I need to take with me when I go see my doctor?   | It is recommended that Medicaid CCC Plus members carry all of their health plan cards when going to their doctor or other medical appointments. Health plan cards may include Medicare, Medicaid, private insurance, TriCare, and your CCC Plus Medicaid Health Plan card (issued by your CCC Plus health plan).   |
| Will I need a referral from my PCP for specialists visits?  | Requirements for specialist referrals may vary by health plan. You can call your health plan and ask them about their referral requirements. You can also find information about referral requirements in each health plan's Member Handbook, available on   |

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|  | the health plan's website. You can find the address for each health plan's website on the CCC Plus Helpline website located at: <a href="http://www.cccplusva.com">www.cccplusva.com</a> . Most of the health plans will not require you to have a referral as long as you see a specialist that participates with your health plan.  |
| Will CCC Plus cover copayments?  | Yes. You should contact your health plan to make sure your pharmacy is in network. Your health plan can help you locate a participating pharmacy in your community. Exceptions: Individuals with Medicare will continue to be responsible for the copayment for any medications covered under Medicare part D. Individuals may have a "patient pay" as determined by the Department of Social Services, towards their long term care services.  |
| Will the prescription medicines I have now be covered in CCC Plus?                                     | Yes, your prescription medications will be covered by your CCC Plus health plan. Individuals with Medicare will continue to be responsible for the copayment for any medications covered under Medicare part D.   |
| Will I have transportation services in CCC Plus?   | <p>Transportation is a Medicaid covered service. It is covered when you do not have another way to get to your medical appointments. For fee-for service members, transportation is currently covered through the Medicaid fee-for-service transportation vendor, LogistiCare. When you enroll with a CCC Plus health plan, your transportation for most services will be covered by your health plan or their transportation vendor. When you receive your CCC Plus welcome packet from your health plan you will get a new member ID card. The ID card will list the phone number to call for transportation. Transportation phone numbers are also available on the DMAS website at: <a href="http://www.dmas.virginia.gov/Content_pgs/mltss-meminfo.aspx">http://www.dmas.virginia.gov/Content_pgs/mltss-meminfo.aspx</a></p> <p>For individuals on a DD waiver, transportation for waiver services is covered through the DMAS fee-for-service transportation vendor, Logisticare. Your CCC Plus health plan will pay for your transportation to non-waiver services. For individuals on the EDCD waiver, transportation services is the responsibility of the CCC Plus health plan.</p> |
| I understand a Care Coordinator will be assigned to me. When can I talk with my Care Coordinator? And, | The Care Coordinator is assigned through the health plan that you are enrolled in. The Care Coordinator will contact you just prior to or shortly after your enrollment begins with your CCC Plus health plan. You are also welcome to reach out to your health plan before your effective date and ask to speak with your Care Coordinator.  |

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| will he/she come to my home?   | To find out who your Care Coordinator is you may call your CCC Plus health plan at the phone number on the back of your ID card. The phone numbers for each of the health plans are also available on the comparison chart sent to you in the mail, and on the CCC Plus Helpline website at: <a href="https://www.cccplusva.com/contacts-and-links">https://www.cccplusva.com/contacts-and-links</a> . You can speak directly to that Care Coordinator to see when he/she is coming to your home, or if they even need to. Depending on the circumstances they may be able to communicate by phone. |
| How will the health plans coordinate with a member who has Tri-Care primary care, Tri-Care Dental and is on the EDCD waiver?   | The health plans all have a Care Coordinator who will work with you on coordinating your services and benefits with Tri-Care. That Care Coordinator will also help to determine if additional services are needed and will help access those services. Tri-Care will continue to be the primary payer and then the Medicaid health plan will pay the difference if there is any balance remaining. Medicaid is always the payer of last resort.   |
| How can I find out which CCC Plus health plan my doctors participate in?   | You can find out which health plan your doctors participate with by going to the CCC Plus website at <a href="http://www.cccplusva.com">www.cccplusva.com</a> or by calling the CCC Plus Helpline at 1-844-374-9159. Your health plan provides the provider directory online and can send you a paper copy upon request.  |
| I'm calling for a member who currently has Humana insurance for her Medicare Advantage plan. She has concerns about being assigned to another program.   | Since Humana is her Medicare health plan, that plan will be unaffected by her enrollment into a CCC Plus health plan since CCC Plus is a Medicaid program. She will have a choice of one of 6 health plans that are participating in the CCC Plus program. Her Care Coordinator with CCC Plus will coordinate with her Medicare Humana plan.  |
| I am a caregiver for my mom. My mom is in a nursing facility. Right now, she is enrolled in traditional Medicare and Medicaid. Is she required to enroll in a Dual Special Needs Plan (D-SNP) for her Medicare services? | D-SNP is a Medicare Advantage plan. The choice to enroll in a D-SNP is with your mom. She can keep traditional Medicare but will still have to choose a CCC Plus Medicaid health plan. There is an advantage to choosing the same health plan for Medicare and Medicaid as the process is more streamlined and there is one payer for all services.   |
| My daughter is on Medicare Part A and B, and also on Medicaid. From the brochure we received in the mail, it looks like she is eligible for a D-SNP. Where   | A Dual Eligible Special Needs Plan (D-SNP) is an option for individuals who are qualified for both Medicare and Medicaid. An individual who has both Medicare and Medicaid has the opportunity to choose the same health plan to be both their Medicare plan and their Medicaid plan. Being in the same plan is beneficial for coordination of care. Your daughter has the option to choose the same plan for her Medicare and Medicaid plan, or she  |

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| can I get more information on D-SNP?  | can keep her current Medicare plan. Individuals who are interested in changing their Medicare plan, can call Medicare directly at 1-800-633-4227.   |
| My mom lives in a nursing facility and likes her primary physician. Can she keep him as her physician?  | CCC Plus health plans are working with the nursing facilities to identify their visiting physicians so that they can contract with these physicians. You can see which health plan your mom's physician participates with by going to the CCC Plus website at <a href="http://www.cccplusva.com">www.cccplusva.com</a> or by calling the CCC Plus Helpline at 1-844-374-9159.   |
| I am receiving services from the EDCD waiver. My personal care attendant receives payment from PPL. Will things stay the same for me or will my services change under CCC Plus? | The Care Coordinator assigned to you will work with you, your Services Facilitator, and your care team to ensure you are receiving the services and supports you need. The health plans are using PPL so that part won't change.  |
| My father has end stage renal disease. Will he be enrolled in CCC Plus?   | If you have ESRD and received a letter to enroll in a CCC Plus health plan, you can call the CCC Plus Helpline at 1- 844-374-9159 and explain that you have ESRD. Individuals with ESRD have the option to enroll with a CCC Plus health plan if they so choose or they can remain in fee-for-service. The Helpline staff will work with DMAS to ensure that your enrollment is corrected. .  |
| My son is on the DD waiver. I would like to know what waiver services he will receive under CCC Plus? Will his day support and group home care be covered under CCC Plus?       | DD (Developmental Disability) waiver services are currently carved out from CCC Plus. This means your son will continue to receive his DD waiver services as he does now. His non-waiver services will be covered under his CCC Plus health plan. These non-waiver services include doctor visits, hospital care, behavioral health services, prescriptions, and non-waiver transportation services. When your son receives his assignment letter, it will include a comparison chart for each health plan that shows the extra benefits provided by each health plan. You can also go to the CCC Plus website at <a href="http://www.cccplusva.com">www.cccplusva.com</a> to see which health plan his doctors participate in. Your son's day support services and group home care will continue to be covered under his waiver and not the CCC Plus health plan. Your son's assignment letter will also include an invitation to a Town Hall near you. We encourage you to attend as DMAS staff and all six health plan representatives will be there in person to answer your questions. |

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| My daughter has Medicare and Medicaid and has had the same doctor for 16 years. Her doctor does not participate in Medicaid. Does she have to change her doctor to be in CCC Plus?                    | Enrollment into a CCC Plus health plan does not impact your daughter's Medicare coverage. Since Medicare is the primary payer for your daughter's medical services, she can continue to see her same doctor. Also, your doctor may be contracted with one of the CCC Plus plans even if he is not contracted with Medicaid. If he is contracted with a CCC Plus health plan, that health plan will coordinate benefits with your Medicare provider.   |
| My son has Medicare, TriCare, and Medicaid. Medicare is the primary payer, and Tricare pays all of the copayments. Since Medicaid is not paying for anything, can we opt out of the CCC Plus program? | The CCC Plus program includes individuals with Medicare and other insurance coverage. You cannot opt out because participation is required. CCC Plus provides your son's Medicaid benefits, including waiver services and other long term supports and services. Your primary comprehensive insurance will cover most of your son's medical benefits. CCC Plus will coordinate benefits for those services. Your son may also be interested in receiving one or more of the extra services covered through the CCC Plus health plans. |
| I live very close to the Virginia/North Carolina border, so some of the services my daughter needs are out-of-state. Will these services be covered under the CCC Plus Program?                       | Some of the CCC Plus health plans do work with providers across the border, so contact the health plan and ask them if your provider is in their network. The CCC Plus helpline can also help you figure out which out of state providers are in network. Lastly, you can contact the physician's office directly to see if they participate with any of the CCC Plus health plans. Talk with your health plan care coordinator about these out of state provider relationships as well.  |
| If I am on Medicare can I still use my same doctor under CCC Plus?  | If the provider currently accepts your Medicare and Medicaid, then it is possible. Medicare is the primary payer for your medical services. CCC Plus, as the Medicaid plan, is the payer of last resort. Most physician services are covered completely by Medicare. There generally is not an amount left for Medicaid to pick up, but if there is, the CCC Plus plan would pick up the remaining balance. Reach out to your provider and let them know your Medicare is not changing.   |
| My doctor said they will no longer be able to treat me with the CCC Plus program, but I need to get a new prescription next month. What do I do to make sure I can continue receiving my medication?  | The best thing for you to do is reach out to the CCC Plus health plan and contact your care coordinator. If you have Medicare, that is NOT changing. That doctor should still accept you under your Medicare insurance, and your Care Coordinator can help address these types of questions.  |

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| My mother has Anthem, but she has not received any information on the CCC Plus changes. Who do I reach out to in order to ensure a smooth transition? We live in Northern Virginia.                                  | CCC Plus is phased in by region. The Tidewater region was the first to go live on August 1. The Central region went live on September 1 <sup>st</sup> . The Charlottesville/Western region will begin on October 1 <sup>st</sup> . Both the Roanoke/Alleghany and Southwest regions will go live on November 1 <sup>st</sup> . The last region to go into effect is the Northern/Winchester area on December 1st. The information is sent out based on the region you are located in. If you live in Northern Virginia, you should not expect to receive the information until October.  |
| It is hard to find a doctor that understands my son's disability, and I have been told we are going to have to choose a new doctor. He has Medicare, Tricare, and waiver services. Where can I get more information? | Your son has been assigned a CCC Plus health plan Care Coordinator who is there to serve him. It will be helpful to reach out to them. Medicare will continue to be the primary payer. Medicaid is the payer of last resort. Your son's Medicaid benefits will continue to cover the waiver services that he needs and receives. To choose a plan other than the one you were assigned, call the CCC Plus helpline. They can help you look at the provider network and assist in choosing the health plan that will work best for your son. Once you choose a plan you will receive a follow up letter with more information from the health plan, including your son's new Care Coordinator's name and contact information. |
| I plan on retiring soon and then my son will no longer be covered by my insurance. Will his medical services then be covered by CCC Plus?  | Yes. When he no longer has another insurance, CCC Plus will become the primary payer.  |
| What happens when my son "ages out" of our insurance? He turns 26 very soon and will only have Medicaid.   | Until he "ages out", the CCC Plus health plan will coordinate benefits with his insurance company. When he no longer has commercial insurance, Medicaid will become his primary insurance and will cover all of his Medicaid covered services. There will be no copayment, and his non-waiver services will continue to be covered as well. Make sure his providers participate with the CCC Plus health plan you choose on his behalf. (Some individuals will have a patient-pay obligation for long term care services.)   |

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| I am concerned that my son's speech and language services will be disrupted by the change to CCC Plus. Can you please clarify if my son will be able to continue receiving his therapy under CCC Plus or not?  | Under CCC Plus, each health plan must continue to cover the same types of services that are covered under regular Medicaid. This includes developmental therapies like your son requires. Medicaid does cover this service which means all 6 of our CCC Plus health plans will cover your son's therapy.   |
| I am the caregiver for my father. If Medicare does not approve Durable Medical Equipment (DME), will Medicaid cover it?  | As long as it is an allowable DME expense (i.e. bedside commode, wheelchairs, etc.), CCC Plus will cover it.   |
| My son has been covered under HIPP for Kids, but he will soon turn 19 and move into Adult HIPP. HIPP has also picked up the premiums of our insurance. Will there be a provision with CCC Plus to handle the cost of the premiums for our insurance? | If your son is in HIPP for Kids or Adult HIPP, he will not be enrolled into CCC Plus. Anyone enrolled in HIPP is excluded from participation in CCC Plus.  |
| My mother has Medicare, Medicaid, and a supplemental insurance. Does CCC Plus replace the supplemental insurance?  | No. The CCC Plus Medicaid health plan replaces your mother's regular Medicaid. Medicare will continue to be the first payer for her medical services; the supplemental plan is the second payer; and the CCC Plus Medicaid health plan will be the payer of last resort. The CCC Plus Care Coordinator will help you better understand all of your mother's services and coverage. |
| There is a lot in the news about funding being reduced by the federal government and some insurance companies withdrawing from the Insurance Exchanges. Will this impact CCC Plus?   | DMAS is aware and are monitoring what is happening at the federal level.<br><br>When an insurance company decides to withdraw from the State Insurance Exchange, it has no impact on CCC Plus. CCC Plus health plans are contracted through a separate process.  |

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| Where are the CCC Plus Informational Town Halls being held? | The CCC Plus Member Town Halls are being held in all regions of the Commonwealth. For dates, times and locations, please go to the DMAS website at <a href="http://www.dmas.virginia.gov">www.dmas.virginia.gov</a> . On the left side of the page, click on “Commonwealth Coordinated Care Plus”. Next, click on the “Members” tab and then click on the “Member Town Hall Schedule”. |